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PTO/IB/17 (10-08)

<p><i>Effective on 12/09/2004.</i> Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4816).</p> <h2 style="margin: 0;">FEE TRANSMITTAL</h2> <h3 style="margin: 0;">For FY 2009</h3>		<p>Complete if Known</p>	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Application Number	10/842,508-Cont. #1861
		Filing Date	August 18, 2003
		First Named Inventor	Shunichi SEKIGUCHI
		Examiner Name	Tung T. VO
		Art Unit	2621
TOTAL AMOUNT OF PAYMENT		(\$)	940.00
		Attorney Docket No.	2565-0273P

<p>METHOD OF PAYMENT (check all that apply)</p>	
<input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____	
<input checked="" type="checkbox"/> Deposit Account Deposit Account Number: <u>02-2448</u> Deposit Account Name: <u>Birch, Stewart, Kolasch & Birch, LLP</u>	
<p>For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)</p>	
<input checked="" type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee	
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 <input type="checkbox"/> Credit any overpayments	

<p>FEE CALCULATION</p>							
<p>1. BASIC FILING, SEARCH, AND EXAMINATION FEES</p>							
	FILING FEES		SEARCH FEES		EXAMINATION FEES		
		Small Entity		Small Entity		Small Entity	
Application Type	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fees Paid (\$)
Utility	330	165	540	270	220	110	_____
Design	220	110	100	50	140	70	_____
Plant	220	110	330	165	170	85	_____
Reissue	330	165	540	270	650	325	_____
Provisional	220	110	0	0	0	0	_____

<p>2. EXCESS CLAIM FEES</p>		
Fee Description	Small Entity Fee (\$)	Fee (\$)
Each claim over 20 (including Reissues)	52	26
Each independent claim over 3 (including Reissues)	220	110
Multiple dependent claims	390	195

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims	Fee (\$)	Fee Paid (\$)
_____	_____	_____	_____	_____	_____	_____
<p>HP = highest number of total claims paid for, if greater than 20.</p>						
Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)			
_____	_____	_____	_____			
<p>HP = highest number of independent claims paid for, if greater than 3.</p>						

<p>3. APPLICATION SIZE FEE</p>					
<p>If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).</p>					
Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)	
_____	_____	_____	_____	_____	_____
<p>_____ / 100 = _____ / 50 = _____ (round up to a whole number) x _____ = _____</p>					

<p>4. OTHER FEE(S)</p>		
<p>Non-English Specification, \$130 fee (no small entity discount)</p>		
<p>Other (e.g., late filing surcharge): 1801 Request for continued examination (RCE) (see 37 ...</p>		810.00
<p>1251 Extension for response within first month</p>		130.00

<p>SUBMITTED BY</p>			
Signature	Registration No. (Attorney/Agent)	40,439	Telephone (703) 205-8035
Name (Print/Type)	D. Richard Anderson		
	Date	December 10, 2009	